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Dated: \_\_\_\_\_

Docket No.: 04303/100N146-US1  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:  
Joel D. Medlock

Application No.: 09/751,776

Art Unit: 2634

Filed: December 29, 2000

Examiner: Edith M. Chang

For: APPARATUS AND METHOD FOR  
CALCULATING AND IMPLEMENTING A  
FIBONACCI MASK FOR A CODE  
GENERATOR

**AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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JUN 07 2004

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Dear Sir:

**INTRODUCTORY COMMENTS**

In response to the Office Action dated April 9, 2004 (Paper No. 5), please amend the above-identified U.S. patent application as follows:

**Amendments to the Specification** begin on page 3 of this paper.

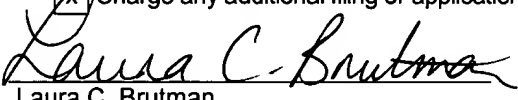
**Amendments to the Claims** are reflected in the listing of claims which begins on page 6 of this paper.

**Amendments to the Drawings** begin on page 8 of this paper and include both an attached replacement sheet and an annotated sheet showing changes.

**Remarks/Arguments** begin on page 9 of this paper.

An **Appendix** including the amended drawing figure is attached following the last page of this paper.



<b>AMENDMENT TRANSMITTAL LETTER</b>			Docket No. 04303/100N146-US1		
Application No. 09/751,776		Filing Date December 29, 2000		Examiner E. M. Chang	Art Unit 2634
Applicant(s): Joel D. Medlock					
Invention: APPARATUS AND METHOD FOR CALCULATING AND IMPLEMENTING A FIBONACCI MASK FOR A CODE GENERATOR					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	2	- 41 =		x	0.00
Independent Claims	2	- 6 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Laura C. Brutman Attorney Reg. No.: 38,395				Dated: <u>June 1, 2004</u>	
DARBY & DARBY P.C. P.O. Box 5257 New York, New York 10150-5257 (212) 527-7664					
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P.O. Box 1450  
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on June 1, 2004  
Date

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*DT Davis*

Signature \_\_\_\_\_

Signature D. Davis

Typed or printed name of person signing Certificate

**Note:** Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment Transmittal (1 page);  
Amendment in Response to Non-Final Office Action (10 pages);  
Replacement Drawings (10 pages; Figs. 1B, 1C, 2, 3, 4, 5A, 5B, 6A, 6B, 6C); and  
Return Receipt Postcard.